SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

FOR LINE NUMBER: PAGE 213 OF 459 Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER.					FAGL	- 4	13 01		1 00	
(check only one)										
	X	11a		11b		11c		12		
		13		14		15		16		17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

or for commercial purposes, other than using t	o namo ana addicas	or any political committee	to contact contributions from outin confillittee.				
NAME OF COMMITTEE (In Full) Political Action Committee of t	the American A	ssociation of Ortho	paedic SurgeonsPAC of AAOS				
Full Name of Individual (Last, First, Middle Detrisac, David, Arthur, , MD Mailing Address 3609 E Arbutus	Date of Receipt						
City Okemos		p Code 48864	Transaction ID : 8908488 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	С		500.00				
Name of Employer (for Individual) Self Employed		ı (for Individual) ic Surgeon	Memo Item				
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to	o-Date ▼ 500.00					
Full Name of Individual (Last, First, Middle Russell, George, V, , Jr, MD	Date of Receipt						
Mailing Address 102 Hawthorne Vale	Ctata 7	n Codo	10 23 2017				
City Ridgeland		p Code 39157	Transaction ID : 8908489 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C		85.00				
Name of Employer (for Individual) Univ of Mississippi Med Ctr		n (for Individual) lic Surgeon	Memo Item				
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to	o-Date ▼ 680.00					
Full Name of Individual (Last, First, Middle . Miller, Brett, A, , MD	Date of Receipt						
Mailing Address 901 N 8th St			10 23 2017				
City Wathena		p Code 66090-0554	Transaction ID: 8908490 Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C		1000.00				
Name of Employer (for Individual) Self Employed	Occupation Orthopaedi	r (for Individual) c Surgeon	Memo Item				
Receipt For: Primary General Other (specify)	Aggregate Year-to	0-Date ▼ 1000.00					
SUBTOTAL of Receipts This Page (optional).		·····	1585.00				
TOTAL This Period (last page this line number	er only)						